

Wales Early Intervention In Psychosis

Service Development and Improvement

Series Five: Adventure Therapy Programme and
Physical Health



Early Intervention in Psychosis
National Steering Group



GIG
CYMRU
NHS
WALES

Iechyd Cyhoeddus
Cymru
Public Health
Wales

Contents

Improvement Cymru is the improvement service for NHS Wales. Our aim is to support the creation of the best quality health and care system for Wales so that everyone has access to safe, effective and efficient care in the right place and the right time

| | |
|--|----|
| Introduction | 3 |
| EIP work programme in Wales | 4 |
| The Role of Adventure Therapy | 7 |
| Adventure Therapy as a Physical Health Intervention | 9 |
| Principles for engagement | 12 |
| Adventure Therapy Case Examples | 14 |
| References, additional resources and acknowledgements | 18 |

Early Intervention in Psychosis

Introduction

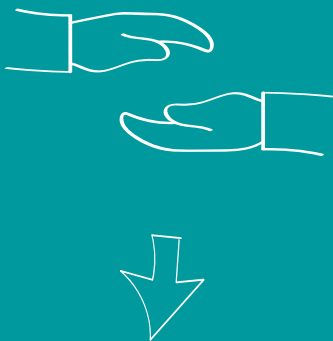
Early Intervention in Psychosis (EIP) services help young people with a first episode of psychosis (FEP) in their recovery and to gain a good quality of life. Services support more than 10,000 young people each year in the UK ⁽¹⁾. A first episode occurs most commonly between late teens and late twenties, with more than three quarters of men and two thirds of women experiencing their first episode of psychosis before the age of 35 ⁽²⁾.

EIP services are the best model for offering consistent treatment and intervention to young people with psychosis. They offer a holistic approach that includes support from a wide range of professionals delivering psychosis specific and evidence-based approaches that offer young people the best chance of experiencing a good quality of life.

Economic evaluation of EIP services suggests an estimated net cost savings of £7,972 per person after the first four years and £6,780 per person in the next four to 10 years if the full EIP provision is provided ⁽³⁾. Over a 10-year period, this would result in £15 of costs saved for every £1 invested in EIP services.



Early Intervention in Psychosis



EIP services in Wales deliver physical health and activity programmes to support learning and engagement around key areas of well being



Access to quick effective treatment leads to improved physical health outcomes and reduced demand on other services



EIP services require staff appropriately trained in physical health assessment and established pathways for onward referral and intervention

EIP Work Programme in Wales

Within Wales, a national EIP programme consists of workstreams focused on key improvement areas. Currently facilitated by Improvement Cymru, the workstream groups are led from within the network encouraging collaboration across services and a sustainable approach for the future. There is a commitment to meeting national standards for services in the UK that contribute to high-quality EIP care, with a drive to promote the engagement of individuals with lived experience and the co-production of initiatives and EIP services nationally.

The workstream approach offers exploration of new ways of working and creation of co-produced national resources and initiatives to support improvement. EIP services in Wales pride themselves on being creative in their approach to service development and in their engagement of young people. One example is collaborating with partner organisations to deliver a national adventure therapy programme that utilises Wales' natural environment to support recovery from psychosis.

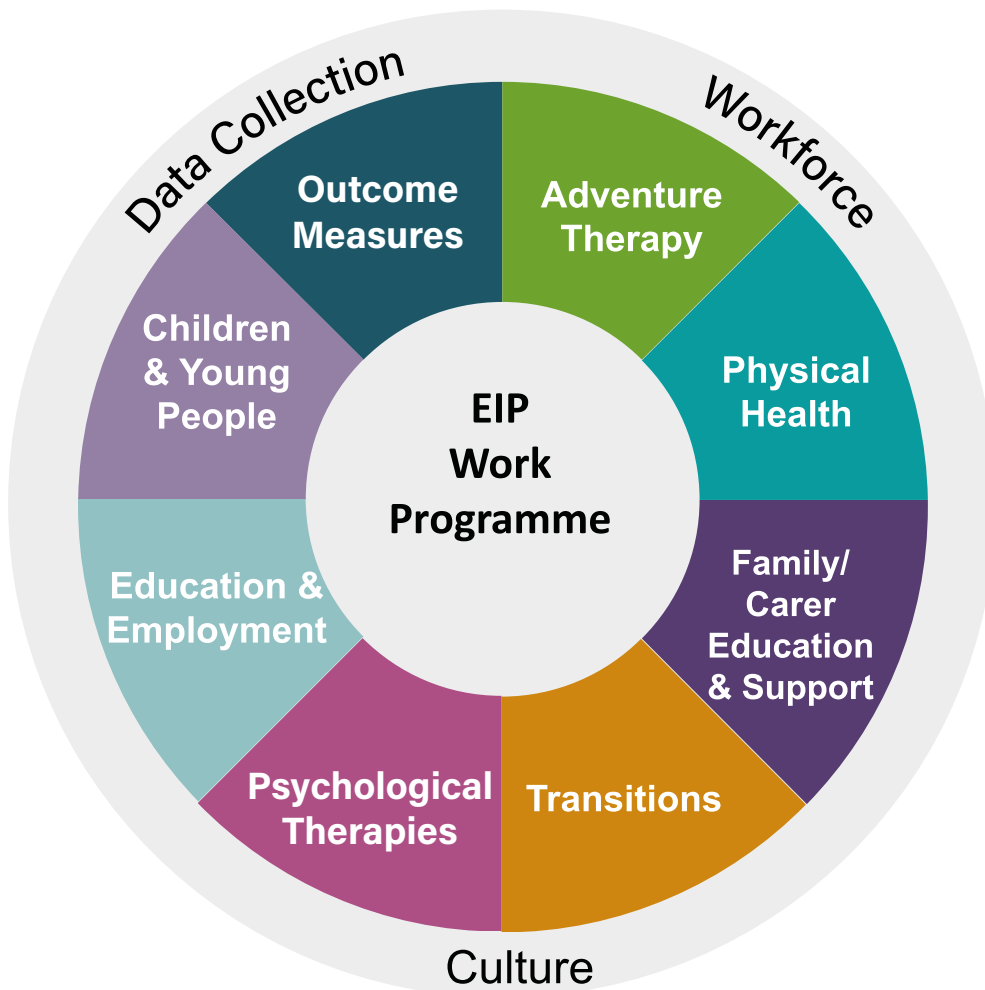


Figure 1: EIP Workstream Wheel

The **Adventure Therapy workstream** aims to support the emotional and physical wellbeing of young people accessing EIP services in Wales by offering an experience-based approach to improving personal recovery. Activities encourage an overall sense of physical and emotional wellbeing, adventure and fun, moving the therapeutic process outside the confines of everyday life.

The EIP adventure therapy workstream group consists of representatives from all EIP services in Wales and partner organisations, the group aims to create a network that:

- Provides opportunities for EIP services, third sector and other community projects and organisations to connect and develop links across Wales

- Offers space to share ideas and work collaboratively to promote and improve recovery through adventure therapy initiatives
- Enables sharing of potential funding streams, exploring ideas on what has worked well and how teams have overcome challenges to implement initiatives

Adventure therapy in EIP is an all Wales national programme delivered through local level initiatives with opportunity to collaborate and host larger scale, cross-health board opportunities.

There are ambitions for a co-ordinated approach to seek funding and engagement with partners that supports development of an ongoing and sustainable adventure therapy programme in Wales.

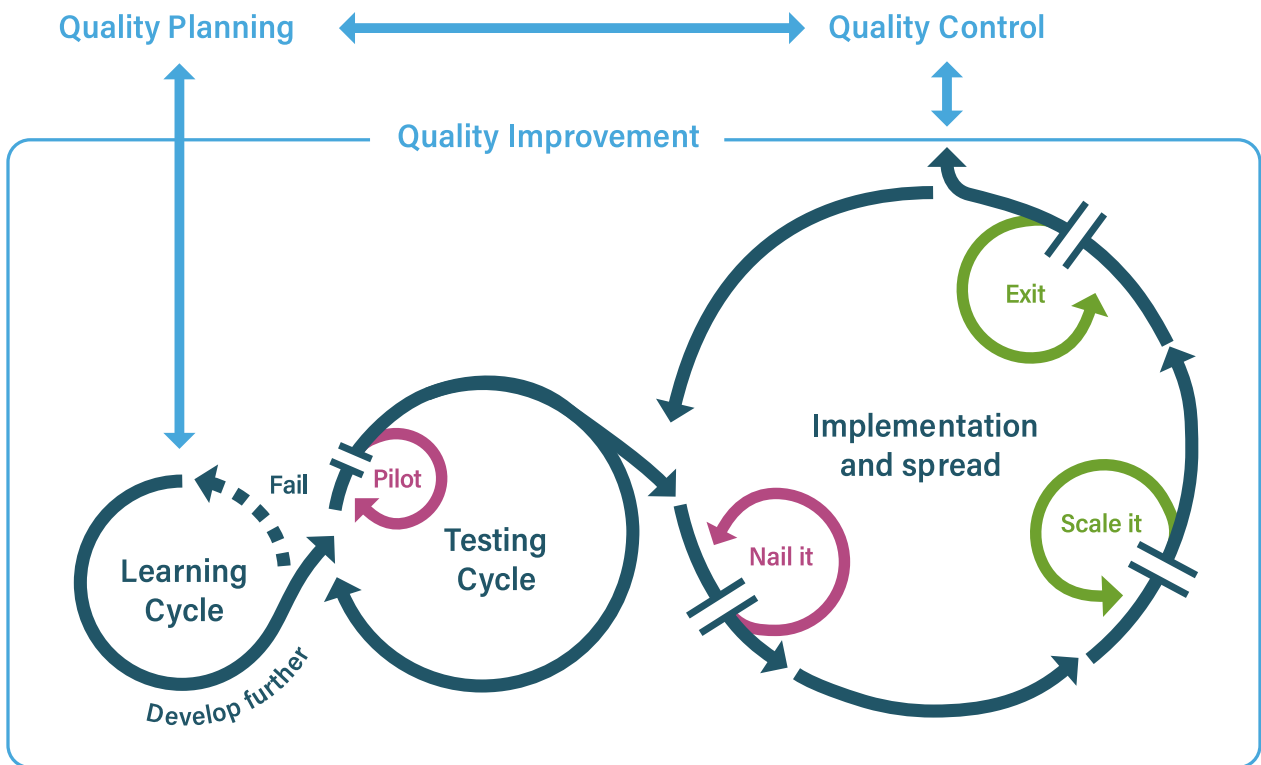


It proves to me how much I can do, that I can get on with my life, even if I do have problems with my mental health...I'm stronger than I think

Improvement Cymru Delivery Framework

The Improvement Cymru Delivery Framework offers a systematic, repeatable process that adapts to the specific needs of each regional context and provides opportunities for learning, testing and sharing ideas. It seeks to support organisations and health and care professionals to navigate the stages of adoption in the critical early stages by enabling the testing and co-producing of improvements.

Regions can use the framework to enable a focus on planning, engagement, testing and spread and scale of improvements, looking to build more effective, system wide improvement capability that integrates with local and national priorities. The framework also ensures citizen involvement at a local level so that improvements are co-produced and achieve outcomes that matter to citizens.



The Role of Adventure Therapy

Adventure Therapy in EIP describes a range of activities that allow for exploration and discovery within a safe and well supported environment. Activities take many forms and use the natural environment to encourage growth of personal and social wellbeing and opportunity to learn new skills.

Gass et al, (2020) summarise the multi-faceted layers that adventure therapy offers as an approach ⁽⁴⁾. Applying this to young people with psychosis can demonstrate the scope of the programme in supporting recovery.

1. **'Action centred'** – moving away from traditional therapy which occurs between two people in a room. Adventure therapy moves people outside, literally, to an environment in which engagement, observation and learning can take place
2. **'An unfamiliar environment'** – by moving outside a familiar environment it is suggested individuals can more easily access new perspectives, which in turn work to breakdown resistance to change
3. **'Climate of change'** – adventure therapy introduces the concept of good stress into people's lives and shows them evidence that they are capable of change
4. **'Assessment of capabilities'** – engagement within the natural world, away from clinical spaces allows assessment of functioning within a 'natural habitat' that may not be possible elsewhere
5. **'Small group development'** – adventure therapy generally takes place in the presence of others, sharing experiences and creating a community in which individuals can recognise the needs and successes of others
6. **'Focus on strengths and successful behaviours'** – rather than unhelpful behaviours and difficulties, adventure therapy approaches emphasise what individuals can do and achieve

7. **'Altered role of professionals'** – when experiences are shared between individuals attending and professionals a balance is created. Everyone is participating in the same kind of challenges and learning occurs together.

Clough, et al (2016), propose that adventurous physical activity should be considered a mainstream intervention for positive mental health ⁽⁵⁾. Activity within natural environments have been found to improve psychological outcomes such as self-confidence, resilience and wellbeing.

With a focus on promoting quality of life, the EIP adventure therapy programme considers the NHS 5 steps to wellbeing by incorporating each element into the activities selected and delivered by local and national initiatives (6):

Connection – with others as a group in safe, encouraging and supportive environments.

Being active – through engagement in activities of differing levels, moving gradually outside an individuals' comfort zone to encourage challenge.

Taking notice – by allowing individuals to be curious, reflect on experiences and be present in the moment.

Learning – by offering opportunity for exploration of new experiences and/or rediscovering skills, and for individuals to learn what they are capable of.

Give – and help others, by supporting each other within a group and ensuring others feel at ease. Exploring opportunity to pursue new interests such as volunteering.

Adventure provides opportunities for individuals to respond to challenge and uncertainty.

When positively experienced, this encourages them to embrace, rather than avoid, challenge and uncertainty in the future ⁽⁵⁾. Within the natural environment there is opportunity for authentic learning to take place as individuals face experiences, sometimes offering a

challenge to the young person, which promote personal resilience and skill development and a need to communicate effectively with others.

The short-and long-term benefits and outcomes of activity and accessing green spaces such as parks and recreation areas for individuals are summarised in Table 1⁽⁷⁾:

Short term outcomes:

- **Skill development** – physical, personal, social, emotional
- **Wellbeing** – self management, reduced social isolation, increased happiness, connection with others, development of relationships
- **Physical health** – enhanced physical wellbeing, energy, capability

Long term outcomes:

- **Skill development** – improved employability, improved educational attainment
- **Wellbeing** – improved quality of life, increased life expectancy, reduced health and social care costs, improved relationships, reduced loneliness, community engagement
- **Physical health** – improved physical health, improved mobility, reduced risk of obesity and lifestyle related physical health conditions

Table 1: Adapted from Higgins et al (2015) *Community Venues and Facilities for Sports, Leisure and Culture- Impacts on Health: A Guide*



PP It makes you feel like you've achieved something DD

Adventure Therapy as a Physical Health Intervention

Evidence suggests a positive impact on physical health outcomes when services offer comprehensive physical health screening and intervention programmes for individuals with a first episode of psychosis⁽⁸⁾. EIP services in Wales are committed to meeting the physical health needs of individuals receiving EIP care with timely and appropriate assessment, and intervention programmes characterised by holistic, person-centred and flexible approaches that include peer engagement to support learning and behaviour change.

Alongside adventure therapy, the national EIP programme includes a **Physical Health workstream** that consists of EIP practitioners and partner organisations from across Wales. The physical health workstream aims to

- Develop and improve physical health monitoring in EIP services nationally, ensuring consistency across Wales
- Bring together practitioners to undertake scoping and planning exercises, share physical health practice developments, promoting learning and improving skills and knowledge
- Work toward achieving and maintaining national clinical audit of psychosis (NCAP) standards
- Create a bespoke physical health programme that can be co-designed for individuals

The development of a bespoke EIP physical health programme for Wales commenced in 2023. On completion, the programme known as **Lifestyle Education to Achieve Potential (LEAP)** will become a core offer to young people from all EIP services.

The LEAP intervention programme offers a co-ordinated and flexible 6-week health, lifestyle and intervention programme. The co-produced programme is youth focused incorporating access to a range of professionals and offering a modular approach to deliver education and intervention focused on positive messaging around improving and maintaining physical health and wellbeing.

Characteristics of the LEAP intervention programme

- Accessed via internal referral within the EIP service
- Delivered as a 6-week group programme
- Each session lasts approximately 90 minutes and is made up of roughly a 30-minute classroom-based learning session followed by a 60-minute activity
- The programme consists of a library of session topics that can be tailored to suit the needs of the group (such as exercise, healthy eating, relationships and sexual health)
- Supporting resources for delivery have been designed as an all Wales group and are available to all EIP services
- Delivery of the programme does not require specialist skill and as such any, and all clinicians within a team can be involved.



The LEAP intervention programme can be adapted to suit the participants due to attend, however several core topics will be covered each time the programme is delivered. This includes a session about adventure therapy in which participants are introduced to the local programme with an opportunity to attend activities. The link between attending and engaging with physical activity and improving not only physical wellbeing but also mental wellbeing is recognised by services in Wales and collaboration across workstream groups is encouraged.

Members of the physical health workstream are working to produce a series of documents to provide:

- Information and examples of clinical resources to support practitioners with physical health screening, monitoring and the interventions required for young people receiving EIP services
- Supportive information to the young person, their families and carers to assist with understanding the importance of maintaining good physical health
- Direction to additional resources that can support EIP services to regularly engage practitioners with ongoing physical health learning and development.

The series of resources are designed to link and align with each other. They include

- **Series Three:** an introduction to EIP and physical health with example resources that can be adopted by services to support practice
- **Series Three A:** EIP physical health assessment and intervention guide
- **Series Three B:** Physical health and measurement for improvement
- **Series Three C:** Dr Sheila Hardy, Charlie Waller Trust – a physical health learning programme for EIP services

Further detail on the development and delivery of the LEAP intervention programme can be found in [Series Three A](#).



EIP Staff Perspective:

“We know physical activity induces a release of endorphins and this triggers positive feelings. You can see it when you’re working with a group, they start to relax and seem happier. They open up more and make friendships. The young people start to lead the activities too... you can see their confidence growing week on week”

“Adventure therapy has been outstanding in enabling the young people to grow in confidence and make or aid friendships and learn more about themselves and others. All our young people reported feeling ‘amazing’ and also to being very grateful for the chance to feel ‘normal!’

We see so much teamwork, understanding for each other and patience, all our young people motivate each other and show so much respect for one another”

“Being outside and part of the adventure therapy programme has allowed everyone to shine, to relax, and to embrace new experiences. Many have continued to use cold water and being active in the lives. As staff, we also observe them in a more relaxed environment and all of us can say that it enhanced our relationships with the young people massively. Adventure therapy has a huge impact on the young people, as well as the staff, that’s for sure”



I started doing these groups and I’ve started feeling like my old self again



Principles for Engagement

Psychosis can have a debilitating impact on a young person’s wellbeing and quality of life. It can affect their personal relationships and their ability to engage in education, training and employment. It can also make it difficult to manage everyday tasks. The symptoms of psychosis present as a barrier to engagement in themselves, in terms of accessing support and developing trusting relationships with professionals.

Engagement therefore needs to be simple. Experiencing psychosis can be a confusing time and lead to social isolation and loss of confidence. Some young people have encountered negative past relationships and experiences and when they become unwell, they withdraw from their networks, whether supportive or not. **The impact of social isolation has been linked to higher levels of relapse and hospitalisation in individuals experiencing psychosis** ⁽⁹⁾.

People with psychosis also have poorer physical health outcomes and a shorter lifespan than the general population. Physical health monitoring and delivery of intervention is therefore a priority

for EIP services in Wales who are committed to explore creative ways to engage young people in activity programmes that support physical health and lifestyle improvements as well as emotional wellbeing; adventure therapy initiatives can play a role in addressing this issue.

The word cloud captures reflections from EIP practitioners and young people under EIP services across Wales around what they perceive to have helped in establishing and maintaining engagement in adventure therapy groups.



Word Cloud 'Adventure Therapy: What helps engagement'

EIP practitioners report individuals with psychosis tend to engage better when the environment they are in is less formal and is more relaxed. Other principles which support an ongoing rapport are **shared decision making, young people feeling respected, empowered and that their voice is heard.**

Challenges

The frequency and type of available adventure therapy activity varies across Wales, many are delivered ad hoc due to finite resources and funding available to services. Working in partnership with charities and third sector organisations supports access to opportunities, however this is dependant on region and funding challenges remain.

Services are creative in their approach to establishing partnerships locally within the community, and the diverse geography and landscape of Wales affords itself to flexible thinking when scoping activities.

Practical barriers such as transport are identified by both EIP practitioners and young people as often problematic, particularly if activities are hosted centrally. In many instances it is necessary for staff to facilitate transport, at least initially to engage individuals. This approach does incur cost, time and staffing resource however services highlight the value in integrating this into an individual's holistic care plan and setting personal goals, becoming part of the 'challenge' and approach itself; for example promoting independence and using public transport.

The ambition in Wales is to develop an all Wales programme of co-ordination and collaboration to deliver adventure therapy as a routine offer from services.

EIP Staff Perspective:

“It does take a while and it is a commitment to set everything up, but actually the groups start to run themselves after a while. Once you get people together and they form friendships the young people don’t want to miss out... they tell us what activities they want to do”



I suffered with my anxiety and couldn't come out of the house... but now it's nice to be able to enjoy life again and appreciate it that bit more

Adventure Therapy Case Examples

Within Wales, EIP case examples have been collated and demonstrate self-reported benefits of engaging in adventure therapy activities. These include improvements in problem solving, self-awareness, curiosity, working toward shared goals, focus, connection with others, self-reflection, confidence, trust, collaboration as part of a team and a sense of accomplishment.

Case Example 1:

Woodland group supporting self-esteem and confidence

Charlotte, was referred to EIP following an admission to the local inpatient mental health unit. She spent around 4 months in hospital experiencing symptoms of psychosis. During that time Charlotte reflects that her routine was disrupted, time spent with others lessened and she would spend long periods of time in her room not interacting with others due to her symptoms and anxiety.

On discharge from hospital Charlotte began working with the EIP service. She found this difficult at first, due to her anxiety, low confidence and continuing to experience intrusive thoughts, but over time she built a trusting rapport with her support worker and nurse. Prior to becoming unwell Charlotte had been very active and sociable, she had finished University studying sports science just prior to experiencing the early signs of psychosis and identified an important goal with her care team as being able to re-engage with activities she had once enjoyed.

Charlotte was offered opportunity to attend woodland activity sessions with the EIP service who had partnered with a local ecotherapy project. Charlotte was worried about attending

but did so alongside her support worker. The sessions were held as a 2-hour activity session each week for 6 weeks as part of the EIP adventure therapy programme. The bespoke group was only open to individuals accessing EIP and included sessions on woodwork, charcoal drawing, woodland walks and as it was near to Christmas – making tree decorations and heating mice pies on the campfire!

Charlotte found the 6-week course offered structure to her week, and opportunity to spend time with others of a similar age. This was important as she had lost touch with her social group when she became unwell. Having her support worker alongside her for the first few sessions, engaging in the activities at the same time offered a sense of connection and safety. The activities were varied, some were mentally challenging rather than requiring physical effort, for example woodwork activities requiring concentration and focus for periods of time. Whilst other activities involved woodland walks supported Charlotte's goal of increasing her activity levels.

Being in the outdoors, within a natural setting removed the 'pressure' to talk and conversation flowed more easily. Charlotte reports that being

Case Example 1:

in the woodland offered space to feel present in the moment away from the 'norm' of everyday life, she felt her confidence grow over time and she and others gradually took a lead in running some of the activities.

Charlotte joined a second series of the sessions, attending independently and has since been actively involved in co-developing future activities delivered by the EIP service locally. Over the past 8 months Charlotte has recently commenced a retail assistant job and has started playing football again, an activity that has always connected her to her family and local community. Charlotte reports engaging in the adventure therapy programme has helped her confidence grow, to manage her anxious thoughts, helped her build friendships and establish a routine again.

Key learning points:

- Adventure therapy sessions do not have to be big statements, for some a walk or a woodland activity session is a challenge. Allow individual space to grow and build on their experiences at their own pace
- Support individuals to consider how the skills they develop during sessions is transferable to everyday life and their future, e.g. education or employment



Case Example 2:

Physical health improvements through adventure therapy engagement

Josh had been working with his local EIP service for a period of time, and although his symptoms had improved, he was left with low confidence and had completely withdrawn from his social contacts over the past 12 months. He and his family told the team he had always been fit and active growing up and he wanted to get back to this but felt it was beyond his reach.

Josh needed lots of encouragement and support from staff but slowly he started to attend some of the adventure therapy activities. Initially just the local ones, easier activities and smaller groups, but with his care team he talked about building this up gradually. Staff witnessed a change in him over time, not just in the brightness in his mood and confidence but also physically he was fitter. This had a knock on affect as Josh began eating a more healthy diet, supported by his family who did the same and set this as a 'family challenge'!

Outside of the adventure therapy sessions, Josh began short local walks around areas he felt comfortable and were familiar to him. Gradually he started going to the gym with his support worker and his fitness improved and he lost weight his confidence grew. Josh's family were really positive about the changes they could see in him..

The change for Josh happened over time; it wasn't a quick process. It needed time and commitment from the team and support from everyone around him.

His support worker reflected on the process, "you could see the potential in this lad, and knowing he had previously loved running and sport and always looked after himself in terms of diet and exercise. He needed the time and support to find this again". "He's doing really well. He says himself there is still some way to go but he can look back over the past couple of years and see the difference, he comes along to almost all our adventure therapy activities now and is currently using the couch to 5k app to help him get back in to running. Also, one thing he is very proud of is that he has stopped smoking!"

Key learning points:

- Commitment from staff and moving at the individual's pace
- Setting person-centred goals that focus on what is important to the individual
- Engage family, friends and carers where possible, invite them to be part of the process
- Allow individuals to have input into activity choices and planning

Case Example 3:

Land to water social prescribing in Swansea Bay

The Swansea Bay EIP service, The Outdoor Partnership and Adferiad Recovery collaborated to offer 8 young people the opportunity to explore the outdoors through a 'Land to Water Social Prescribing Pilot Programme.'

The programme focused on ecotherapy activities promoted through sessions that involved walks, bush craft and outdoor cooking, in addition to water-based activities hosted locally. Sessions were varied to enable opportunity to try out lots of new experiences, including a RNLI led water safety talk and a 'reflection session' to gather anonymous feedback at the half-way point.

During the programme the group travelled to the Gower and spent time in the water. One of the activity leaders describes how on calm day the group used tow floats so they could lie back and rest their heads. A general sense of relaxation was reported with the facilitators encouraging participants to regulate their breathing to encourage a calming, positive experience being in the water.

Feedback from pre and post evaluation questionnaires plus verbal feedback demonstrated positive experiences and results for all involved with a reported sense of achievement.

For some young people, the sessions introduced them to new activities; for one it was the first time they had been in the sea, and which has since led them to try surfing. Another young person reported walking in the woods was a calming and visual experience and after the session asked the team if they could continue this activity after the 6-week programme.

Key learning points:

- Offer specific detail on session content to alleviate anxieties; for example, how long a planned walk will be, what the terrain will be like
- Consider adding in education around sustainability and activities that promote how we engage with and care for the environment around us



References

1. Rethink (2013) Lost Generation: Why young people with psychosis are being left behind and what needs to change. Available at [lost-generation-rethink-mental-illness-report.pdf](#)
2. Marshall M, Lewis S, Lockwood, Drake R, Jones P, Croudace T. Association between duration of untreated psychosis and outcome in cohorts of first-episode patients: a systematic review. *Archives of General Psychiatry.* (2005); 62:975-83
3. Knapp M, Andrew A, McDaid D, Lemmi V, McCrone P, Park AL, et al. Investing in Recovery: Making the Business Case for Effective Interventions for People with Schizophrenia and Psychosis. London: The London School of Economics and Political Science, Centre for Mental Health and Department of Health; (2014)
4. Gass, M., A., 'Lee' Gillis, H. L. & Russell, K. C. (2020) *Adventure Therapy: Theory, Research and Practice.* Routledge
5. Clough, P. MacKenzie, S. H., Mallabon, L. & Brymer, E. Adventurous Physical Activity Environments: A Mainstream Intervention for Mental Health. *Sports Medicine.* (2016) 46:963–9686. New Economics Foundation (NEF) on behalf of Foresight (2008). Five Ways to Wellbeing. Government Office for Science. Available at http://issuu.com/neweconomicsfoundation/docs/five_ways_to_well-being?mode=embed&viewMode=presentation
6. [5 steps to mental wellbeing - NHS \(www.nhs.uk\)](#)
7. Higgins M, Arnott J, Douglas M. J. (2015) *Community Venues and Facilities for Sports, Leisure and Culture- Impacts on Health: A Guide.* ScotPHN
8. Scheewe TW, Backx FJG, Takken T, Jörg F, van Strater ACP, Kroes RS, et al. Exercise therapy improves mental and physical health in schizophrenia: A randomised controlled trial. *Acta Psychiatr Scand* (2013) 127:464–73
9. Tee H, Priebe S, Santos C, Xanthopoulou P, Webber M, Giacco D. Helping people with psychosis to expand their social networks: The stakeholders' views. *BMC Psychiatry.* (2020) 20(1):1–10. London.

Additional resources

Video demonstrating how Adventure Therapy is effectively being used to support people's recovery from psychosis (2023). Available on You tube: [Adventure therapy is helping people in Wales to recover from psychosis. - YouTube](#)

Acknowledgements

Paper developed by the Improvement Cymru EIP Programme team

The all Wales adventure therapy workstream group and wider EIP workforce for your commitment, passion and drive to improve care and experiences for young people with early psychosis

Adferiad Recovery, The Outdoor Partnership and the partner agencies who collaborate with EIP services across Wales to deliver adventure therapy programmes

A special mention to the young people engaged in the activities, challenges and interventions and who continuously inspire us to want to achieve more for EIP services in Wales

You can keep up-to-date with developments by visiting our website and signing up for our monthly e-newsletter:

www.improvement.cymru

You can also follow us on social media:

Follow us on Twitter [@ImprovementCym](https://twitter.com/ImprovementCym)

Like us on [Facebook](https://www.facebook.com/ImprovementCym)

Subscribe to us on [YouTube](https://www.youtube.com/ImprovementCym)

Connect with us on our [LinkedIn page](https://www.linkedin.com/company/ImprovementCym)

Improvement Cymru

2 Capital Quarter
Tyndall Street
Cardiff
CF10 4BZ

© **Improvement Cymru 2023**

Published Oct 2023

This document is licensed under the Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International (CC BY-NC-ND 4.0). This allows for the copy and redistribution of this document as long as Improvement Cymru is fully acknowledged and given credit. The material must not be remixed, transformed or built upon in any way. To view a copy of this licence, visit <https://creativecommons.org/licenses/by-nc-nd/4.0/>